

**DECLARATION OF INVENTOR(S)  
FOR UNITED STATES PATENT APPLICATION**

ATTORNEY DOCKET NO.

V9661.0016

As a below-named inventor, I hereby declare that I verily believe that I am the original, first, and sole inventor (if only one name is listed below) or a joint inventor (if plural inventors are named) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**A DIMMABLE BALLAST WITH RESISTIVE INPUT AND LOW ELECTROMAGNETIC INTERFERENCE**

the specification of which is attached hereto, unless the following box is checked:

was filed on \_\_\_\_\_ as United States patent Application Number or PCT International patent application number \_\_\_\_\_ and was amended on \_\_\_\_\_ (if any).

I have read and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose all information known to me to be material to the patentability of the invention in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby claim priority benefits under Title 35, United States Code §119 of any foreign application(s) for patent or inventor's certificate or United States provisional application(s) listed below and have also identified below any foreign application(s) for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

COUNTRY	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 U.S.C. § 119
UNITED STATES	60/518,880	November 10, 2003	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

UNITED STATES APPLICATION NUMBER	DATE OF FILING (day, month, year)	STATUS (patented, pending, abandoned)

SEND CORRESPONDENCE TO: DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP  
1177 Avenue of the Americas, 41st Floor  
New York, NY 10036-2714

DIRECT TELEPHONE CALLS TO:  
(212) 835-1400

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME OF SOLE OR FIRST INVENTOR FRANKI NGAI KIT POON	INVENTOR'S SIGNATURE	DATE <i>16 Mar 04</i>
RESIDENCE (City and either State or Foreign Country) Hong Kong, China		COUNTRY OF CITIZENSHIP Hong Kong
POST OFFICE ADDRESS 1 <sup>st</sup> Floor, 312, Ki Lung Street, Shan Shui Po, Kowloon		
FULL NAME OF SECOND JOINT INVENTOR (IF ANY) MAN HAY PONG	INVENTOR'S SIGNATURE	DATE <i>16 Mar 04</i>
RESIDENCE (City and either State or Foreign Country) Hong Kong, China		COUNTRY OF CITIZENSHIP Hong Kong
POST OFFICE ADDRESS Flat G, 1 <sup>st</sup> Floor, Tower 13A, Yee Fai Court, South Horizon, ApLeiChau		
FULL NAME OF THIRD JOINT INVENTOR (IF ANY) JOE CHIU PONG LIU	INVENTOR'S SIGNATURE	DATE <i>16 Mar 04</i>
RESIDENCE (City and either State or Foreign Country) Hong Kong, China		COUNTRY OF CITIZENSHIP Hong Kong
POST OFFICE ADDRESS Flat 3406, Kwai Fung House, Kwai Chung, N.T.		